File with: lowa Ethics and Campaign Disclosure Board 510 E. 12th, Ste. 1A Des Moines, Iowa 50319 Fax: 515-281-4073



VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

FOR INSTRUCTIONS, SEE BACK OF FORM

IA ETHICS AND CAMPAIGN DISCLUSURE

DISCLOSURE SUMMARY PAGE

	AL COMMANT TAGE		2008 JUL 16 AM 10: 44
COMMITTEE NAME (Must be same as on Statement of	Organization)		
Linda Humphrey For Auditor			FORM
IMPORTANT: Indicate by # type of committee you are reporting (1) Statewide/Legislative/Judge Standing for Retention Candida (4) County Central Committee (5) County Candidate (6) City Subdivision Candidate (8) County PAC (9) City PAC (10) Sc 11) Local Ballot Issue	ate (2)State PAC (3)State Party		DR-2 (Rev. 07/2007) DISCLOSURE REPORT For Office Use Only
CANDIDATE COMMITTEES ONLY:		=	Comm. #
Candidate Name	Political Party (if applicable)		Scanned
Linda Humphrey	Democrat		Computer
Office Sought Auditor	District (if Senate or House)		Audited
Late reports are subject to possible civil and criminal penaltie	s. Pursuant to lowa Code sections 68B.32A	.(7) and (58A.401(3), the candidate, for a
Dinda J. Humphrey	641-664-2401		7/14/08
SIGNATURE OF PERSON FILING REPORT	TELEPHONE	_	DATE SIGNED
AM FILING A July 21, 2008	DEDART FOR (1) TI TOTION		
(report date)	REPORT FOR (1) ELECTION	J	I-ELECTION YEAR.
•	Indicate by #	•Ш	
CHECK IF AMENDMENT TO REPORT DATED		Local Co	mmittees, enter Date of Election
Check if this is final (termination) report and attach Not (You must continue to file reports until a DR-3 is	filed \		Local Committees, enter County in action is held Davis
STATEMENT OF CASH ON HA	AND		
CASH ON HAND at the beginning of the reporting period. committee. This amount MUST be the same as of the last reporting period or must be zero if this	the cash on hand at the end	s	47.24
ADD TOTAL MONEY TAKEN IN THIS PERIOD	,	•	
Schedule A: Cash Contributions total (Attach Sc	hedule A) (*also see in-kind below)		450.00
Schedule F: Loans Received total (Attach Sched			
Schedule H: Total Sales of Campaign Property			
(Schedule H applies to Candidates' C	Attach Schedule H)		
		•••••••	
	ommittees Only)		497.24
SUBTRACT TOTAL MONEY SPENT THIS PER	ommittees Only) SUB-TOTAL		497.24
	ommittees Only) SUB-TOTAL	\$	497.24
SUBTRACT TOTAL MONEY SPENT THIS PER Schedule B: Expenditures total (Attach Schedule Schedule F: Loan Repayments total (Attach Sch	OMMITTEES ONLY) SUB-TOTAL IOD B B) (**also see debts and loans below)	\$	
Schedule B: Expenditures total (Attach Scheduk	SUB-TOTAL SUB-TOTAL SOD B) (**also see debts and loans below) edule F)	\$	
Schedule B: Expenditures total (Attach Schedule Schedule F: Loan Repayments total (Attach Schedule F) at the end of this reporting period (if final	OMMITTEES ONLY) SUB-TOTAL SUB-TOTAL.	\$	50.00
Schedule B: Expenditures total (Attach Schedule Schedule F: Loan Repayments total (Attach ScheASH ON HAND at the end of this reporting period (if fina "UNPAID BILLS (From Schedule D - Attach Schedule D)	SUB-TOTAL SUB-	\$	50.00
Schedule B: Expenditures total (Attach Schedule F: Loan Repayments total (Attach Schedule F: Loan Repayments total (Attach Schedule F: ASH ON HAND at the end of this reporting period (if fina "UNPAID BILLS (From Schedule D - Attach Schedule D) IN KIND CONTRIBUTIONS (From Schedule E - Attach S	Ommittees Only) SUB-TOTAL IOD B (**also see debts and loans below) edule F) report balance must be zero) Chedule E)	\$\$	50.00
Schedule B: Expenditures total (Attach Schedule Schedule F: Loan Repayments total (Attach ScheASH ON HAND at the end of this reporting period (if fina "UNPAID BILLS (From Schedule D - Attach Schedule D)	Ommittees Only) SUB-TOTAL IOD B (**also see debts and loans below) edule F) report balance must be zero) Chedule E)	\$\$	50.00

For Instructions, See Back of Form	Reset Form	SCHEDULE	
CONTRIBUTIONS MONEY TAKEN IN (Including candidate's personal funds)		A (Rev. 07/03)	MONETARY RECEIPTS
COMMITTEE NAME (Must be same as on Statement of Organization)			CK THIS BOX IF

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

Linda Humphrey For Auditor

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	√ IF FOR FUND- RAISER INCOME
6/6/2008	ID# CK# _{N/A}	Linda Humphrey 26634 - 215th St., Bloomfield, IA 52537	Candidate	\$ 200.00	
7/11/2008	ID# CK# N/A	Linda Humphrey 26634 - 215th St., Bloomfield, IA 52537	Candidate	250.00	
	ID#				
	CK#				<u> </u>
	CK#				
	ID# CK#				
**************************************	ID#				
	CK#				
	CK#				
	ID#			<u> </u>	
	ID#				
	CK#				
	ID# CK#				
	1	l	SUB-TOTAL	\$ 450.00	
		TOTAL (if last pag	ge of this schedule)	450.00	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1 (for Schedule A)

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Recet Form	4
Reset Form	

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES						
CHECK THIS BOX IF							

COMMIT	T	EE	NAME	(Must	be	same as on Statement of	Organization)

Linda Humphrey For Auditor

CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
ID# CK# 1007	Tri County Shopper P. O. Box 168 Bloomfield, IA 52537	newsprint advertising	\$ 33.75
ID# CK# ₁₀₀₈	newsprint advertising	183.80	
ID# CK# 1009	Bloomfield Communications 207-209 S. Madison Bloomfield, IA 52537	newsprint advertising	31.20
ID# CK# ₁₀₁₀	Linda Humphrey 26634 - 215th St. Bloomfield, IA 52537	reimbursement for Candidate's personal check paid for professional publicity photo.	74.90
ID# CK# ₁₀₁₁	Linda Humphrey 26634 - 215th St. Bloomfield, IA 52537	reimbursement for Candidate's personal check paid for family t-shirts printed w/campaign ad.	123.59
ID# CK#			
ID# CK#			
ID#			
	ID NUMBER (if applicable) AND PAC CHECK NUMBER ID# CK# 1007 ID# CK# 1008 ID# CK# 1009 ID# CK# 1010 ID# CK# 1011 ID# CK# 1011	ID NUMBER (if applicable) AND PAC CHECK NUMBER ID# Tri County Shopper P. O. Box 168 Bloomfield, IA 52537 ID# Bloomfield Communications 207-209 S. Madison Bloomfield, IA 52537 ID# Bloomfield Communications 207-209 S. Madison Bloomfield, IA 52537 ID# Linda Humphrey 26634 - 215th St. Bloomfield, IA 52537 ID# Linda Humphrey 26634 - 215th St. Bloomfield, IA 52537 ID# CK# 1011 CK# Linda Humphrey 26634 - 215th St. Bloomfield, IA 52537 ID# CK# 1011 CK# Linda Humphrey 26634 - 215th St. Bloomfield, IA 52537 ID# CK# 1011 CK# Linda Humphrey 26634 - 215th St. Bloomfield, IA 52537 ID# CK# ID# ID# ID# ID# ID# ID# ID# ID# ID# ID	ID NUMBER (if applicable) AND PAC CHECK (NUMBER (Disbursement) WAS MADE ID# Tri County Shopper P. O. Box 168 Bloomfield, IA 52537 ID# Bloomfield Communications 207-209 S. Madison Bloomfield, IA 52537 ID# Bloomfield Communications 207-209 S. Madison Bloomfield, IA 52537 ID# CK# 1009 Bloomfield, IA 52537 ID# Linda Humphrey 26634 - 215th St. Bloomfield, IA 52537 ID# CK# 1010 Bloomfield, IA 52537 ID# CK# 1011 Chief Communications Bloomfield, IA 52537 ID# CK# 1011 Chief Ch

SUB-TOTAL

\$ 447.24

TOTAL (if last page of this schedule)

\$ 447.24

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

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